24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	C C00495028
	O constant
Check if 24-hour report X 48-hour report New report Amends report filed on	
Full Name of Payee Waterfront Strategies	Date of Public Distribution/Dissemination
•	08
Mailing Address 3050 K St NW	Amount
Ste 100 City State Zip Code	77338.55
Washington DC 20007-5108	Transaction ID : VN7GDA2AVR6 Date of Disbursement or Obligation
Purpose of Expenditure Television Advertising Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 02
Emily Cain Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
Calcinati Total To Bato	ursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	77338.55
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	77338.55
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	08 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	